## REQUEST FOR REFUND OR EXEMPTION OF CITY OF MOUNTAIN VIEW REAL PROPERTY CONVEYANCE TAX MOUNTAIN VIEW CITY CODE SECTION 29.62

City of Mountain View Finance and Administrative Services Department P.O. Box 7540 Mountain View, CA 94039-7540

## REAL PROPERTY CONVEYANCE TAX

Grantor	::		
Grantee	·		
County propert RE	Recorder of Santa y conveyance tax for EFUND OF REAL Pl	Clara County or requestive the reasons stated below	CE TAX PAID:
	<u> </u>	nt(s) was/were recorded nveyance tax was paid.	d with the County Recorder and the
a.	Type of Documer	t Recorded (copy attache	ed):
b.	Doc. No	in Book	at Page No
c.	Date of Recording	j.	
d.	Amount of Tax Pa	aid: \$	(attach receipt)
		OR	

	MPTION OF REAL PROPERTY CONVEYANCE TAX FOR PROPOSED NSFER:		
Document(s) <u>not</u> yet recorded with the County Recorder and no tax paid yet. Applicant wants prior determination of exemption.			
BASIS FOR CLAIM OF REFUND OR EXEMPTION			
	Transfer of property between immediate family members (grandparent; parent; child; spouse).		
	Transfer of property pursuant to property settlement in dissolution of marriage pursuant to Revenue and Taxation Code Section 11927.		
	Transfer of property for purpose of adding or deleting a cosigner with no financial consideration.		
	Transfer of real property by deed, etc., conveying lands by inter vivos trust or by reason of death pursuant to Revenue and Taxation Code Section 11930.		
	Partnership per Mountain View City Code Section 29.71.		
	Transfer of property title to accommodate a change in office of the trustee. No change in ownership and no financial consideration.		
	Other (29.66, 29.67, 29.68, 29.69, 29.70).		

## STATEMENT OF FACTS

I/We declare that I/we qualify for a refund or exemption of the City of Mountain View real property conveyance tax for the following reasons:

1 1 1	ne foregoing information and statement of facts or exemption of the real property conveyance
Executed this day	y of, 20, at ornia.
(Printed Name of Claimant)	(Printed Name of Claimant)
(Signature of Claimant)	(Signature of Claimant)
(Title of Claimant)	(Title of Claimant)
CITY OF MOUNTAIN VIEW	
Approved	Denied
By: Finance and Administrative Services Director	
Dated:	
Please include the following documents	with this request:
Copy of last recorded deed.	
• Copy of any applicable sections of a	trust document that establish the key facts.

Additional documentation may be requested, as necessary.